

3625
JFV

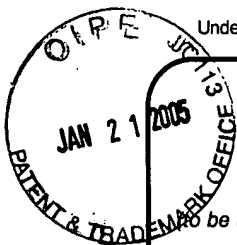
RPTO/SB/21 (08-00)

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Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

Do not be used for all correspondence after initial filing)

| | | | |
|--|---|------------------------|-----------------|
| TRANSMITTAL FORM | | Application Number | 09/820,428 |
| | | Filing Date | March 28, 2001 |
| | | First Named Inventor | Leon |
| | | Group Art Unit | 3625 |
| | | Examiner Name | Fadok, M. |
| Total Number of Pages in This Submission | 6 | Attorney Docket Number | 006969-021220US |

| ENCLOSURES (check all that apply) | | |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) Return receipt postcard 2) Six (6) references 3) Fee Transmittal Form (PTO/SB/17) |
| Remarks | | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. Total number of pages <u>does not</u> include cited references. |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm and Individual name | Townsend and Townsend and Crew LLP David N. Slone Reg No. 28,572 |
| Signature | <i>David Slone</i> |
| Date | January 19, 2005 |

| CERTIFICATE OF MAILING | | | |
|--|------------------------|------|------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: | | | |
| | | | January 19, 2005 |
| Typed or printed name | Christopher R. Fitting | | |
| Signature | <i>Ch Fitting</i> | Date | January 19, 2005 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. 60400975 v1

JAN 21 2005

PTO/SB/17 (12-04)

Effective on 12/08/2004
Fees pursuant to the Consolidated Appropriations Act, 2005 (Pub. Law 108-447, 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 180.00)

Complete if Known

| | |
|----------------------|-----------------|
| Application Number | 09/820,428 |
| Filing Date | March 28, 2001 |
| First Named Inventor | Leon |
| Examiner Name | Fadok, M. |
| Art Unit | 3625 |
| Attorney Docket No. | 006969-021220US |

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|--------------|----------|--------------|----------|------------------|----------|----------------|
| | Small Entity | Fee (\$) | Small Entity | Fee (\$) | Small Entity | Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Small Entity | |
|---|--------------|----------|
| | Fee (\$) | Fee (\$) |
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent | 50 | 25 |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims | Fee (\$) | Fee Paid (\$) |
|---|--------------|----------|---------------|---------------------------|----------|---------------|
| -20 or HP = | x | \$ | = \$0 | | | |
| HP = highest number of total claims paid for, if greater than 20 | | | | | | |
| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | | | |
| -3 or HP = | x | \$ | = \$0 | | | |
| HP = highest number of independent claims paid for, if greater than 3 | | | | | | |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| - 100 = | / 50 = | (round up to a whole number) x | = | |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement (after office action)

Fees Paid (\$)

180.00

SUBMITTED BY

| | | | | | |
|-------------------|----------------|-----------------------------------|--------|-----------|------------------|
| Signature | David Slone | Registration No. (Attorney/Agent) | 28,572 | Telephone | (650) 326-2400 |
| Name (Print/Type) | David N. Slone | | | Date | January 19, 2005 |

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

PATENT
Attorney Docket No.: 006969-021220US

Commissioner for Patents
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Alexandria, VA 22313-1450

On

1/19/05



TOWNSEND and TOWNSEND and CREW LLP

By:

[Signature]

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

J.P. Leon

Application No.: 09/820,428

Filed: March 28, 2001

For: SYSTEM AND METHOD FOR
MANAGING MULTIPLE POSTAL
FUNCTIONS IN A SINGLE ACCOUNT

Examiner: Mark Fadok

Art Unit: 3625

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the non US patent references are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

01/25/2005 EABUBAK1 00000015 201430 09820428

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As provided for by 37 CFR 1.97(g) and (h), no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information, and no inference should be made that the information and references cited are, or are considered to be material to patentability because they are in this statement. No inference should be made that the information and references cited are prior art merely because they are in this statement.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance. Please charge the IDS fee of \$180 to Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

A handwritten signature in black ink that reads "David Slone". The signature is written in a cursive, flowing style.

David N. Slone
Reg. No. 28,572

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, California 94111-3834
Tel: 650-326-2400
Fax: 650-326-2422
DNS:crf



| | | | | | |
|---|---|----|---|--------------------------|-----------------|
| INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary) | | | | Complete if Known | |
| | | | | Application Number | 09/820,428 |
| | | | | Filing Date | March 28, 2001 |
| | | | | First Named Inventor | Leon, J.P. |
| | | | | Art Unit | 3625 |
| | | | | Examiner Name | Mark Fadok |
| Sheet | 2 | of | 2 | Attorney Docket Number | 006969-021220US |

| NON PATENT LITERATURE DOCUMENTS | | | |
|--|--------------------------|---|----------------|
| Examiner Initials * | Cite No. ¹ | Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published. | T ² |
| | AR | BRANSTEN, "Second firm to test Internet postage meeting," Wall Street Journal, 8/25/98. | |
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| Examiner Signature | | Date Considered | |
|-----------------------|--|--------------------|--|

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.